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VITL Progress Report to the General Assembly – January 2007

Dear Legislator:

Attached please find the Vermont Information Technology Leaders, Inc. (VITL) progress report through January 1, 2007.

During 2006, VITL made significant progress in writing the Vermont Health Information Technology Plan (VHITP). A workgroup with more than 30 volunteers, representing a broad cross-section of interests, convened to develop the vision and principles that will guide the plan. They also identified issues that must be given further consideration. A preliminary plan has been completed and delivered to the General Assembly under separate cover.

A critical part of the VHITP will be running pilot projects, and then using the experience gained from those projects to shape the broader adoption and implementation of technology. VITL laid a strong foundation for the pilot projects in October when it signed a prime contractor agreement with GE Healthcare of South Burlington. The contract signing was the culmination of seven months of negotiations, and followed an extensive request for proposals process.

On the same day that the GE Healthcare contract was signed, VITL signed a contract with the Vermont Department of Health to provide comprehensive data services for the Blueprint for Health's chronic care information system, which will go live in July. Contracts have also been signed with two hospitals to run a medication history pilot project, which will go live in late February.

Another major project that VITL has undertaken is gathering information about current privacy and security practices, and the potential barriers that privacy issues might present to health information exchange. In the coming months, VITL will be receiving input from many different groups, including consumers and physicians, and seeking a consensus.

All of this progress would not have been possible without the thousands of hours of work that has been contributed by the volunteers who serve on VITL's board of directors, subcommittees, advisory panels, and workgroups. Their dedication ensures that the interests of all Vermonters are being represented as VITL continues its work.

We look forward to your continued support of VITL in 2007 as we launch our pilot projects, work collaboratively with state agencies on initiatives like the Blueprint for Health, and complete the VHITP.

Respectfully submitted,

W. Cyrus Jordan, MD, MPH Chair, VITL Board of Directors

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Guiding Principle: Sharing health information is a critical tool for improving the overall performance of the health care system. VITL will work with the Vermont health care community to achieve new efficiencies through the use of information technology in order to deliver better overall value and care to our citizens.

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1. Background

Vermont Information Technology Leaders, Inc., is a Vermont not-for-profit organization. VITL's 501(c)(3) status is pending with the Internal Revenue Service. VITL was incorporated on July 22, 2005, and is funded by the Vermont General Assembly. VITL is a multi-stakeholder corporation formed by a broad base of health care providers, payers, employers, patients, state agencies, and information technology vendors. These various constituencies are represented by volunteers who serve on VITL's board of directors, its subcommittees, and its advisory groups.

VITL has been charged by the General Assembly [V.S.A. Title 18, Chapter 221, § 9417] with the task of writing the Vermont Health Information Technology Plan (VHITP). VITL also conducts health information technology pilot projects, which will provide valuable real-world information for the technology plan. VITL has been working with the Vermont Department of Health and other state agencies on health information technology projects, and will develop a statewide health information exchange to allow health care organizations to share data.

The efforts of VITL are being coordinated with other state and federal initiatives, including the National Health Information Network (NHIN) of the federal Office of the National Coordinator for Health Information Technology, the national eHealth Initiative, and the Vermont Blueprint for Health. VITL's work helps to facilitate communication among Vermont's privacy and health information technology experts and creates the foundation for future health information technology collaboration.

2. VITL Pilot Projects

The first VITL pilot project will be a medication history service, which will be available in the emergency departments of the Rutland Regional Medical Center and the Northeastern Vermont Regional Hospital in St. Johnsbury. Contracts with these two hospitals have been signed. A contract has also been signed with GE Healthcare to provide the information technology used in the pilot project. GE Healthcare was selected after a competitive bidding process that involved 15 proposals at the outset and four finalists. VITL engaged in lengthy contract negotiations with GE Healthcare, which concluded with a contact signing in October.

With a patient's consent, the hospital will be able to electronically request a list of all the paid medications that the patient is taking. This information will be supplied by major insurers through their pharmacy benefit management companies. Contracts with Blue Cross Blue Shield of Vermont, MVP Healthcare, and Medicaid have been signed.

Data supplied by the electronic medication history will supplement information gathered by physicians and nurses from the patient and family members. It will save critical time in the emergency department and provide additional information for practitioners to use when making clinical decisions. It will also help prevent medication errors, which improves quality of care.

VITL decided to embark on the medication history pilot project after surveying physicians and learning that providing comprehensive medication history information is the biggest opportunity for improving care using health information technology. The first two medication history sites are scheduled to go live by the end of February. Eventually, VITL expects to expand the service to all emergency departments in Vermont.



Future pilot projects will be developed with input from health care practitioners. Through its Practitioner Advisory Group, VITL will ask which projects have the highest priority and would produce the greatest impact, in terms of improving quality of care and efficiency.

3. VITL / Blueprint Collaboration

In October, VITL and the Vermont's Blueprint for Health signed a five-year contract to formalize this collaboration. VITL will provide comprehensive data services for the Blueprint for Health's chronic care information system. GE Healthcare will be the prime contractor on the project, providing a central data repository and sending information to participating physicians for their use in treating patients with chronic conditions, such as diabetes. The physicians will use disease management software from Orion Healthcare to view and analyze the data. The first physician practice is expected to begin using the system in July.

4. Health Information Security and Privacy Collaboration

During the fall of 2006 VITL's Health Information Security and Privacy Collaboration (HISPC) team conducted group discussions and one-on-one interviews with approximately 40 different individuals to collect information about operational practices related to the current exchange of health information in paper or electronic form.

The team was able to document variations in business practices and barriers to privacy, security, and health information exchange. Health care professionals and representatives of consumer groups were convened to discuss the preliminary scope of the project and the team identified a number of important themes relevant to the VHITP.

Several significant initiatives are emerging from the HISPC and VITL collaboration. These include putting in place a process for receiving input from consumers and health care practitioners and reaching consensus, developing recommendations related to privacy and security, providing input on technical architecture, and working with various groups to find a balance between patient privacy and the appropriate level of physician access to records.

5. Vermont Health Information Technology Plan

The preliminary VHITP has been drafted and delivered to the General Assembly under a separate cover. The document outlines the issues that are being examined and what content will be contained in the final plan, due to the General Assembly and the Administration July 1. The plan is being developed by a workgroup of more than 30 volunteers, who meet weekly by conference call. Discussions are also taking place via an email listserv and face-to-face at monthly advisory group meetings in Montpelier. HLN Consulting, LLC, has been retained by VITL to help develop the plan.

6. VITL Board and Advisory Group Subcommittees

VITL continues to receive strong support from dedicated volunteers who serve on its board and advisory groups. These volunteers represent a broad range of interests, including consumers, insurers, employers, state agencies, physicians, hospitals, other health care providers, and health information technology vendors. The active involvement of so many people ensures that the interests of all Vermonters are well represented.

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The governance structure of VITL includes a 18-member board of directors. The board meets monthly and makes decisions on all aspects of VITL's operations, including contracts and the final content of the technology plan. VITL President Greg Farnum reports to the board.

A six-member executive committee meets weekly and functions as a steering committee. The executive committee is also serving as an interim personnel committee.

Board members are in the process of forming a governance subcommittee, which will analyze the structure of VITL, including its board and bylaws, and may recommend changes in order to ensure that there is a balanced representation of various interests on the board.

An advisory group, which mostly consists of individuals other than board members, also meets monthly to provide input on both VITL projects and the VHITP.

Four subcommittees have been meeting periodically.

- The privacy subcommittee serves as VITL's knowledge experts on HIPAA regulations and
 applicable state laws in the areas of confidentiality and security of patient information. The group has
 developed standard participant agreements covering HIPAA and state law requirements for use by all
 participating organizations.
- The **finance and grant writing subcommittee** has been providing advice on a business plan that will allow VITL to eventually operate based on revenues created from its operations. While VITL is building its product line, the committee is working closely with VITL staff to identify and apply for grant funding from non-state sources.
- The **standards and architecture subcommittee** serves as VITL's knowledge experts in data, system interoperability, interface messaging, data standards, and technical architectures for the pilot projects and the VHITP. The subcommittee will help set system requirements and monitor success measures in the medication history pilot and other projects to determine their effectiveness.
- The **education and awareness subcommittee** is developing a campaign to inform members of the public about VITL and its projects. This includes educational materials about the medication history pilot project, which will be handed out to patients in the emergency department who are asked to provide consent.

7. VITL Communications

In October, VITL hired a part-time communications director, who is responsible for public relations, internal and external communications, and marketing. VITL is redoing its web site and will add several features to facilitate communication, both between volunteers serving on VITL groups and also with members of various constituencies, including health care practitioners, patients, and payers. VITL also intends to publish print and electronic newsletters and to make regular educational presentations to groups around the state.

8. Health Information Technology National Scene

VITL works closely with both the Office of the National Coordinator for Health Information Technology and the eHealth Initiative Foundation. VITL is one of the organizations that is assessing variations in privacy and security practices and providing input into national efforts to develop standards for a national health information network.

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9. Future Challenges

The major challenges that VITL faces continue to be funding for electronic medical records, incentives for physicians to adopt EMRs and train their staffs, and balancing patient privacy issues with efficient data access. With GE Healthcare and other leading vendors involved in projects, as well as volunteers from many Vermont organizations, technology is not a major barrier.

To overcome the barriers, physician input will be critical. VITL is involving health care practitioners in developing strategies for success by convening a Practitioners Advisory Group, which will meet monthly by conference call beginning in January. One of the tasks of this advisory group will be prioritizing the deployment of data services to best meet their needs.

10. Summary

During 2006, VITL laid a strong foundation for health information exchange in Vermont. Contracts were put into place that will enable leading technology to be used to improve patient care and efficiency. Now VITL is building on that foundation and the first projects will begin producing results in 2007. VITL is also well on its way to producing the VHITP that will provide recommendations to the General Assembly and the Administration for encouraging the adoption of health information technology throughout the state of Vermont.

There are difficult issues that must be dealt with in the months ahead, which could impede the widespread use of health information technology if not addressed adequately. But VITL intends to put considerable time and resources into developing practical solutions for a wide spectrum of Vermonters.